FORM C/OH **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Total pages filed: 1 Filer ID The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER Bonnie** NAME Date Received RECEIVED **NICKNAME** LAST **SUFFIX** Potraza Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** 3510 Chellen Drive MAILING **ADDRESS** CONTY SECRETARY'S OFFICE Change of Address Farmers Branch, TX 75234 Date Processed Date Imaged FIRST CAMPAIGN MS / MRS / MR MI TREASURER NAME **NICKNAME SUFFIX** Connally STREET ADDRESS (NO PO BOX PLEASE): **CAMPAIGN** ZIP CODE **TREASURER ADDRESS** 36/2 Court dale Dr. Farmers Brand TX 15234 (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION** TREASURER 912 PHONE 989 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) 8th day before election Final Report (Attach C/OH-FR) July 15 Exceeded \$500 limit **PERIOD** Month Day Year Month Day Year **COVERED** 07/01/2019 **THROUGH** 12/31/2019 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) None **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

				2 of 8		
13 C / OH NAME	Potraza, Bonnie	,	14 Filer ID			
15 NOTICE FROM POLITICAL COMMITTEE(S)	OM candidate / officeholder. These expenditures may have been made without the candidate's or office LITICAL consent. Candidates and officeholders are required to report this information only if they receive n					
Additional Pages	COMMITTEE TYPE GENERAL	E COMMITTEE NAME				
	SPECIFIC	COMMITTEE ADDRESS				
	-	COMMITTEE CAMPAIGN TREASURER NAME				
	_	COMMITTEE CAMPAIGN TREASURER ADDRES	;S			
16 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED				\$ 0.00		
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			5)	\$ 0.00		
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS			ITEMIZED	\$ 0.00		
	\$ 726.99					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 8,212.27		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP. OF THE REPOR	OF THE LAST DAY	\$ 0.00			
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of Candidate or Officeholder						
AFFIX NOTARY STAMP / SEAL ABOVE						
	Sworn to and subscribed before me, by the said					
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath					

SUBTOTALS - C/OH

FORM C/OH

	COVER SHEET PG 3
18 FILER NAME Potraza, Bonnie	iler ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 726.99
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C	/ОН \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETU TO FILER	RNED \$

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/BankIng Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 1/5 Rpt: 4/8	Potraza, Bonnie	
4	Date	5 Payee name	
	08/09/2019	Alphagraphics	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$497.85	3001 Knox St #102	
		Dallas, TX 75205	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T	
		Check if Austin, TX, officeholder living expense	
		Flyers and door hangers	
_			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
_			
	Date	Payee name	
	07/03/2019	Dallas Morning News	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.03	1954 Commerce St	
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
		Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription	
	OF EXPENDITURE Complete ONLY if direct	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 08/05/2019 Amount (\$)	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 08/05/2019 Amount (\$)	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 08/05/2019 Amount (\$)	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 08/05/2019 Amount (\$)	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name Dalfas Morning News Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 08/05/2019 Amount (\$) \$14.03	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code 1954 Commerce St	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019 Amount (\$) \$14.03	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 08/05/2019 Amount (\$) \$14.03	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019 Amount (\$) \$14.03	Advertising Expense Check if travel outside of Texas. Complete Schedule T, Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T, Check if Austin, TX, officeholder living expense DMN online subscription	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019 Amount (\$) \$14.03 PURPOSE OF EXPENDITURE	Advertising Expense Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201 (a) Category (see categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Office held Office held Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019 Amount (\$) \$14.03	Advertising Expense Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201 (a) Category (see categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Office held Office held Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019 Amount (\$) \$14.03 PURPOSE OF EXPENDITURE	Advertising Expense Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201 (a) Category (see categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Office held Office held Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 08/05/2019 Amount (\$) \$14.03 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	Advertising Expense Candidate/Officeholder name Office sought Office held Payee name Dallas Morning News Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201 (a) Category (see categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Office held Office held Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DMN online subscription Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

Candidate/Officeholder/Political Committee Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 2/5 Rpt: 5/8	Potraza, Bonnie				
4	Date	5 Payee name				
	09/03/2019	Dallas Morning News				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$14.03	1954 Commerce St				
L		Dallas, TX 75201				
8 PURPOSE OF		(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.: Check if Austin, TX, officeholder living expense				
		DMN online subscription				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
Г	Date	Payee name				
	10/03/2019	Dallas Morning News				
Г	Amount (\$)	Payee address; City; State; Zip Code				
	\$14.03	1954 Commerce St				
		Dallas, TX 75201				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense				
		DMN online subscription				
		A SIMILO SUBSCRIPTION				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH					
H	Date Payee name					
	11/04/2019	Dallas Morning News				
\vdash						
Amount (\$) Payee address; City; State; Zip Code						
	\$14.03 1954 Commerce St					
Dallas, TX 75201						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		DMN online subscription				
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	Complete ONLY if direct expenditure to benefit C/Oh					
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L						

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID					
	Sch: 3/5 Rpt: 6/8	Potraza, Bonnie					
4	Date	5 Payee name					
	12/03/2019	Dallas Morning News					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$14.03	1954 Commerce St					
		Dallas, TX 75201					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		DMN online subscription					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	<u> </u>					
	Date	Payee name					
	07/15/2019	GoDaddy					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$19.18	14455 North Hayden Road					
		Scottsdale, AZ 85260					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Website hosting and related web services					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
	Date	Payee name					
	08/15/2019	GoDaddy					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$19.18	14455 North Hayden Road					
		Scottsdale, AZ 85260					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T					
		Check if Austin, TX, officeholder fiving expense Website hosting and related web services					
		Website Hosting and related Web services					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OF	1					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/5 Rpt: 7/8	Potraza, Bonnie
4	Date	5 Payee name
	09/16/2019	GoDaddy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.65	14455 North Hayden Road
		Scottsdale, AZ 85260
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website hosting and related web services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	
	Date	David Same
		Payee name
	10/15/2019	GoDaddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.65	14455 North Hayden Road
		Scottsdale, AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Website hosting and related web services
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	J
_	Data	
	Date 11/15/2019	Payee name
		GoDaddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.65	14455 North Hayden Road
		Scottsdale, AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T
		Check if Austin, TX, officeholder fiving expense Website hosting and related web services
		website flosting and related web services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
		e e

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER footby a set open set listed above.

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services The Instruction Guide		Vages/Contract La		THER (enter a category n	ot listed above)	
1	Total pages Schedule F1:	2 FILER NAM	E			3 Fi	iler ID	
	Sch: 5/5 Rpt: 8/8	Potraza, Bo						
4	Date	5 Payee name	•					
	12/15/2019	GoDaddy						
6	Amount (\$) \$26.65	7 Payee addre 14455 Nort	ess; City; h Hayden Road	State; Zip Co	ode			
		Scottsdale,						
8	PURPOSE OF		See Categories listed at the to	op of this schedule)	(b) Descript		of Texas. Complete Scheo	tule T
	EXPENDITURE	Advertising	Exhense				iceholder living expense	auto 7
							nd related web se	rvices
9	Complete ONLY if direct		iceholder name	Office sou	l Ight		Office held	
	expenditure to benefit C/OI	Η						
								ľ